SENATE BILL 776

J1 (3lr2679)

ENROLLED BILL

— Finance/Health and Government Operations —

Introduced by Senator Pugh Senators Pugh, Garagiola, Glassman, Kelley, Kittleman, Klausmeier, Mathias, Middleton, Pipkin, and Ramirez

| Read and | Examined by Proofreaders: |
|--|---|
| | Proofreader. |
| | Proofreader. |
| Sealed with the Great Seal and | presented to the Governor, for his approval this |
| day of | at o'clock,M. |
| | President |
| | CHAPTER |
| AN ACT concerning | |
| | elehealth to Improve Maryland Health Care ce – Maryland Health Care Commission |
| FOR the purpose of establishing t | the Task Force on the Use of Telehealth to Improve |
| , 1 | viding for the membership, co-chairs, and staffing of |
| , 1 | for the duties of the Task Force; providing that a |
| member of the Task Force r | may not receive certain compensation but is entitled |
| to certain reimbursement; r | requiring the Task Force to provide certain reports to |
| the Governor and the Gener | ral Assembly on or before certain dates; providing for |
| the termination of this Act; | and generally relating to the Task Force on the Use |
| of Telehealth to Improve | Maryland Health Care <u>declaring the intent of the</u> |
| General Assembly that the | Maryland Health Care Commission, in conjunction |
| with the Maryland Health 6 | Quality and Cost Council, continue to study the use of |
| | tate through the Telemedicine Task Force: requiring |

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

<u>Underlining</u> indicates amendments to bill.

1

2 3

Strike out indicates matter stricken from the bill by amendment or deleted from the law by amendment.

Italics indicate opposite chamber/conference committee amendments.



| 1 | the Task Force to consist of certain advisory groups and undertake certain | | | | | |
|-----------------|--|--|--|--|--|--|
| 2 | activities; and requiring the Commission, on or before certain dates, to submit | | | | | |
| 3 | certain reports of the Task Force to the Governor and certain legislative | | | | | |
| 4 | committees. | | | | | |
| 4 | <u>communecs</u> . | | | | | |
| 5 | SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF | | | | | |
| | | | | | | |
| 6 | MARYLAND, That: | | | | | |
| 7 | (a) There is a Task Force on the Use of Telehealth to Improve Maryland | | | | | |
| 8 | Health Care. | | | | | |
| O | Hearth Care. | | | | | |
| 9 | (b) The Task Force consists of the following members: | | | | | |
| 10 | (1) one member of the Senate of Maryland, appointed by the President | | | | | |
| 11 | of the Senate: | | | | | |
| 11 | or the penate; | | | | | |
| 12 | (2) one member of the House of Delegates, appointed by the Speaker of | | | | | |
| | | | | | | |
| 13 | the House; | | | | | |
| | | | | | | |
| 14 | (3) the Secretary of Health and Mental Hygiene, or the Secretary's | | | | | |
| 15 | designee; | | | | | |
| | | | | | | |
| 16 | (4) the Director of the Department of Health and Mental Hygiene's | | | | | |
| 17 | Office of Rural Health, or the Director's designee; | | | | | |
| | | | | | | |
| 18 | (5) the Director of Program Development for the Maryland Critical | | | | | |
| 19 | Care Network Vice President of Telemedicine - University of Maryland Medical | | | | | |
| 20 | System, or the Director's Vice President's designee; | | | | | |
| | <u> </u> | | | | | |
| 21 | (6) the Executive Director of the Maryland Health Care Commission, | | | | | |
| $\frac{1}{2}$ | or the Executive Director's designee; | | | | | |
| | of the Executive Director's designee, | | | | | |
| 23 | (7) the Executive Director of the Rural Health Association, or the | | | | | |
| $\frac{23}{24}$ | Executive Director's designee; | | | | | |
| 44 | DACCULIVE DIFFECTOR'S ACSIGNACE, | | | | | |
| 05 | (0) the Everytime Director of the Dunel Manuford Council on the | | | | | |
| 25 | (8) the Executive Director of the Rural Maryland Council, or the | | | | | |
| 26 | Executive Director's designee; | | | | | |
| ~= | | | | | | |
| 27 | (9) the Executive Director of the Maryland Institute for Emergency | | | | | |
| 28 | Medical Services Systems, or the Executive Director's designee; and | | | | | |
| | | | | | | |
| 29 | (10) the following members, appointed by the Governor: | | | | | |
| | | | | | | |
| 30 | (i) two representatives from the medical communities | | | | | |
| 31 | organizations that serve medically underserved populations in the State or are located | | | | | |
| 32 | in provider shortage underserved areas across the State that include both rural and | | | | | |
| 33 | urban areas; | | | | | |

| 1 | | (ii) | two consumers or representatives of consumer advocate |
|------------|-------------------------------|---------------------|---|
| 2 | organizations; | | |
| 3 | | (iii) | one representative from the State health information |
| 4 | exchange; | | |
| 5 | | (iv) | two representatives of the health insurance industry; |
| 6 | | (v) | two representatives from roundtables established in the |
| 7 | State to study tele | health | <u>=</u> |
| 8 | | (vi) | one representative from the State's Telemedicine Task Force |
| 9 | of 2011; | | |
| 10 | | (vii) | one individual who provides home health care through |
| 1 | telemedicine; | | |
| 12 | | (viii) | one individual who provides care through a |
| 13 | patient-centered r | nedica | l home; |
| 4 | | (ix) | one individual who provides acute care through |
| 15 | telemedicine; | | |
| 16 | | (x) | one licensed psychiatrist; |
| L 7 | | (xi) | one licensed provider of behavioral health services; |
| 18 | | (xii) | one representative of a hospital that is participating in |
| 19 | telemedicine; and | | |
| 20 | | (xiii) | one representative of the Governor's Workforce Investment |
| 21 | Board; | | |
| 22 | | (xiv) | two representatives of Federally Qualified Health Centers, |
| 23 | including one from | ı a cent | ser in a rural area and one from a center in an urban area; |
| 24 | | (xv) | one representative of the Maryland Chamber of Commerce; |
| 25 | and | | |
| 26 | | (xvi) | one representative of the Arc of Maryland. |
| 27 | (e) The | memb | ers appointed by the Presiding Officers of the General |
| 28 | Assembly shall co- | | |
| 29 | (d) The l | Maryla | nd Health Care Commission shall provide staff for the Task |
| RN | Force | - | • |

| 1 | (e) | A membe | r of the Task Force: |
|----------------|--|---|---|
| 2 | | (1) ma | y not receive compensation as a member of the Task Force; but |
| 3 4 | State Trave | | entitled to reimbursement for expenses under the Standard ns, as provided in the State budget. |
| 5 | (f) | The Task | Force shall: |
| 6 7 | and health | | ntify opportunities to use telehealth to improve health status ry in the State, including an analysis of: |
| 8 | | (i) | underserved populations and areas; |
| 9 | | (ii) | applications for cost-effective telehealth; |
| 10 11 | chronic and | (iii) l acute care | <u>e</u> |
| 12 | | (iv) | innovative payment models; <u>and</u> |
| 13 14 15 | result, in o | (v) cost–effectiv | the types of telehealth services that are resulting, or would ve care and improved outcomes for patients in the Medicaid |
| 16 | <u>• </u> | (2) ass | ess factors related to telehealth, including an analysis of: |
| 17 18 | informatior | (i) 1-exchange; | supportive uses of electronic health records and the health |
| 19 20 | engagemen | (ii) t, educatior | multimedia uses of products and services for patient n, and outcomes; |
| 21 | | (iii) | health professional productivity, resources, and shortages; |
| 22 | | (iv) | emerging technology and standards for security; and |
| 23 | | (v) | public and private grant funding; and |
| 24 25 26 | | | whether the term "telemedicine", as defined in § 15-139 of should be amended to include a reference to a service, known as "e-visit", that: |
| 27 28 | manageme : | n t service; | 1. includes an online medical evaluation and |

| [| | <u>2</u> | is completed | using a | HIPAA-ee | mpliant or | ıline |
|---|------------------------------------|-------------------------|--|--------------------------|-------------------------|-------------------------|------------------|
| 2 | connection and a | secured Web | site or secured | electronic ma | ail address | for each pat | tient |
| 3 | encounter; and | | | | | | |
| 1 | | 2. | creates a perm | anent record | of each vis | sit; | |
| ó | (3) | collaborate | with: | | | | |
| 3 | | (i) rour | dtables establis | hed to stud | lv telehea l | th uses in | the |
| , | State; | 、 / | | | | | |
| 3 | | (ii) the | Rural Maryland | Council; and | | | |
|) | consider approprie | | other organizati | on that the c | co-chairs o | f the Task I | lorce |
| | (4) by the roundtable | review and | l consider any st | udies, report | s, or other | work compl | leted |
| | · | | | 41 M 1 D | <i>0</i> • 1 | | 1 |
| | (5) recommendations | | other topic that ne use of teleheal | | | eessary to n | nake |
| | (6) | make reco | mmendations re | egarding the | use of to | elehealth in | the |
| 5 | State, including re | ecommendat | ions for: | | | | |
| , | quality; | (i) impi | coving health | care afforda | ability, ac | cessibility, | and |
| | quarry, | (ii) deve | lloping a model | for statewide | tolohooltl | <u> </u> | |
|) | service, and access | ` ' | noping a moder | ioi state wiac | | i iiii asti act | ourc, |
| | | (iii) utili | zing public and p | rivate grant | funding; | | |
| | | (iv) prov | iding workforce | training; and | | | |
| | | (v) impi | oving public hea | lth. | | | |
| | (g) (1) | | re May 1, 2014 | | | | |
| | provide an interi | | | | | | |
| | Governor and, in | | with § 2-1246 | of the State | e Governn | ent Article, | the |
| 7 | General Assembly | - | | | | | |
| 3 | (2) | | re December 1, 2 | | | | |
|) | a final report on i | | | | | | ance |
|) | with § 2-1246 of t | he State Gov | rernment Article | , the General | Assembly. | i | |

| 1 | | | tent of the General Assembly that the Maryland Health Care |
|----------------|----------------------------|-------------------------|--|
| 2 | | - | ction with the Maryland Health Quality and Cost Council, |
| 3 | | the us | e of telehealth throughout the State through the Telemedicine |
| 4 | <u>Task Force.</u> | | |
| 5 | <u>(b)</u> <u>The '</u> | Task F | orce shall: |
| 6 | <u>(1)</u> | consi | st of three existing advisory groups: |
| 7 | | <u>(i)</u> | the clinical advisory group; |
| 8 | | <u>(ii)</u> | the technology solutions and standards advisory group; and |
| 9 | | <u>(iii)</u> | the financial and business model advisory group; |
| 10 11 | (2) care delivery in th | | tify opportunities to use telehealth to improve health status and that includes an analysis of: |
| 12 | | <u>(i)</u> | underserved population areas; |
| 13 | | <u>(ii)</u> | $applications\ for\ cost-effective\ telehealth;$ |
| 14 15 | chronic and acute | <u>(iii)</u> care; c | innovative service models for diverse care settings to include and |
| 16 | | <u>(iv)</u> | innovative payment models; |
| 17 | <u>(3)</u> | asses | es factors related to telehealth that includes an analysis of: |
| 18 19 | information excha | <u>(i)</u> inge; | supportive uses of electronic health records and health |
| 20 21 | engagement, educ | (ii) ation, o | multimedia uses of products and services for patient and outcomes; |
| 22 | | <u>(iii)</u> | health professional productivity, resources, and shortages; |
| 23 | | <u>(iv)</u> | emerging technology and standards for security; and |
| 24 | | <u>(v)</u> | public and private grant funding; |
| 25 26 27 | | access | tify strategies for telehealth deployment in rural areas of the to health care and meet any increased demand for health care on of the Patient Protection and Affordable Care Act; and |
| 28 29 | (5) necessary to make | | y any other topic the Maryland Health Care Commission finds mendations regarding the use of telehealth in the State. |

| $\frac{1}{2}$ | (c) The Maryland Health Care Commission shall submit to the Governor and, in accordance with § 2–1246 of the State Government Article, the Senate Finance |
|--------------------------|--|
| 3 | Committee and the House Health and Government Operations Committee: |
| 4 5 | (1) on or before January 1, 2014, an interim report of the Task Force findings and recommendations; and |
| 6 7 | (2) on or before December 1, 2014, a final report of the Task Force findings and recommendations. |
| 8 9 10 11 12 | SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect October June July 1, 2013. It shall remain effective for a period of 1 year and 8 months 2 years and, at the end of May 31 June 30, 2015 2016 2015, with no further action required by the General Assembly, this Act shall be abrogated and of no further force and effect. |
| | |
| | |
| | Approved: |
| | Governor. |
| | President of the Senate. |
| | Speaker of the House of Delegates. |